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**A LOOK BACK AT THE
TOP STORIES AT
JOINT BASE
SAN ANTONIO –
FORT SAM HOUSTON**

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Editorial Staff

502nd Air Base Wing Commander
Brig. Gen. Theresa C. Carter

502nd ABW Public Affairs Director
Todd G. White

JBSA-FSH Public Affairs Officer
Karla L. Gonzalez

Editor
Steve Elliott

Writer/Editor
Lori Newman

Layout Artist
Joe Funtanilla

News Leader office:

2080 Wilson Way
 Building 247, Suite 211
 Fort Sam Houston
 Texas 78234-5004
 210-221-2030
 DSN 471-2030

News Leader Advertisements:

Prime Time
 Military Newspapers
 Ave E at Third Street
 San Antonio, Texas 78205
 (210) 250-2024

News Leader email:

usaf.jbsa.502-abw.mbx.
 fsh-news-leader@mail.mil

News Leader online:

www.samhouston.army.mil/PAO

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New study shows the military contributes more than \$27 billion to the San Antonio area economy

A new study released by the City of San Antonio's Economic Development Department and Office of Military Affairs found that the economic impact of the military's jobs, investment and spending in San Antonio totals more than \$27 billion and supports more than 189,000 jobs, directly and indirectly.

"The results of this study confirm just how critically important the military is to our economy and to our community, particularly in supporting growth in the SA2020 targeted industries of healthcare/biosciences, aerospace and information security," said Mayor Julián Castro.

This study, completed by Dr. Steve Nivin of the SABER Institute, found that the Department of Defense accounts for over 132,000 direct jobs in San Antonio, with Joint Base San Antonio operating as the largest single employer in the community employing more than 92,000.

This direct employment produces another 57,000 indirect and induced jobs for a total of 189,000 jobs contributing \$19 billion of the \$27 billion total military economic impact.

In addition, the Department of Defense awarded almost \$4 billion in contracts to local businesses with \$1.5 billion going toward SA2020 targeted industry companies.

Local contracting accounts for \$6.5 billion of the total military economic impact and more than 55,000 military retirees living in San An-



"The results of this study confirm just how critically important the military is to our economy and to our community, particularly in supporting growth in the SA2020 targeted industries of healthcare/biosciences, aerospace and information security,"

*Julián Castro
 Mayor of San Antonio*

tonio account for another \$2.2 billion of the impact.

"We have always known the military's economic impact on our community was significant," said City Manager Sheryl Sculley.

"This study confirms what tremendous assets we have in our military bases and in all the companies that support their activities in San Antonio."

A good measure of the economic impact activity can be attributed to the Department of Defense related job growth and investment resulting from the 2005 round of Base Realignment and Closure.

Since 2005, the City of San Antonio has partnered with Bexar County and the Greater San Antonio Chamber of Commerce through the

Military Transformation Task Force to assist the military and leverage BRAC to maximize opportunities in economic development, neighborhood revitalization, transportation, utility infrastructure and health care delivery.

For example, BRAC has resulted in establishing an internationally renowned teaching and

research hospital and creating the world's largest school for training military medical technicians graduating 47,000 annually.

It has also attracted the headquarters for U.S. Army North, U.S. Army South, the U.S. Army Installation Management Command, the Mission and Installation Contracting Command and many more.

With the completion of BRAC 2005, this study assessed how the military has grown and captured the DoD's economic impact to the community.

However, not all of the economic impact gain can be attributed to BRAC 2005. Missions such as the Air Force's Cyber Command's 24th Air Force, moved to San Antonio during this time and provided hundreds of new jobs to the community.

"The City of San Antonio, Bexar and surrounding counties have cultivated a remarkable relationship with Joint Base San Antonio," said Brig. Gen. Theresa C. Carter, commander of the 502nd Air Base Wing and Joint Base San Antonio.

"It has been no secret for decades that this is an area which embraces the military and backs words with deeds," Carter added.

"No wonder so many military members choose to stay here when they complete their service."

(Source: City of San Antonio's Economic Development Department and Office of Military Affairs)

Army North charges into 2013; command tackled hurricanes, homeland security, more in 2012

By Staff Sgt. Keith Anderson
 ARNORTH Public Affairs

With a wide-range of mission sets, from homeland defense to theater security cooperation, it was a busy year for the Soldiers and their civilian partners at U.S. Army North (Fifth Army).

The San Antonio-based Army command rapidly deployed and supported response and recovery operations for Hurricane Sandy, which struck the East Coast Oct. 29.

From Army North defense coordinating elements on the ground in New York, New Jersey, Pennsylvania and West Virginia, to planners in the 24-hour Combined Operations and Intelligence Center in San Antonio, ARNORTH personnel coordinated de-watering missions, aerial assessments, the set-up of distribution centers, search and evacuation missions, the transportation of utilities workers from around the nation to disaster sites, and many other life-saving and life-sustaining missions.

Army North, as the Joint Force Land Component Command of U.S. Northern Command, took part in joint operations with U.S. Customs and Border Protection to secure our nation's borders.

The mission, known as "Operation Nimbus II" and led by Army North's Joint Task Force-North, paired Avenger and Sentinel Soldiers with border patrol agents on the ground in February and March to perform reconnaissance in remote areas



Photo by Staff Sgt. Keith Anderson

Lt. Gen. William Caldwell IV, commanding general, U.S. Army North and senior commander, Fort Sam Houston and Camp Bullis, along with Tom Green, King Antonio XC, pass in review of the military formation April 22 during the 2012 Fiesta Fort Sam Houston Military Ceremony at MacArthur Parade Field. The senior enlisted leaders from commands located throughout Joint Base San Antonio-Fort Sam Houston, from company level through the major commands, represented their units, along with their organizational colors.

of southwestern N.M. and southern Arizona, and facilitated the interdiction and arrests of illegal aliens and contraband.

As part of Army North's theater security cooperation mission, the command worked with Mexican and Canadian militaries to combat transnational criminal organizations and to secure land approaches to the United States.

Throughout the year, Army North worked with Secreteraria de la Defensa Nacional (Mexican Secretariat of National Defense)

through personnel exchanges, joint conferences, a coordinated disaster response exercise and hosted trips such as the Fifth Army Inter-American Relations Program.

During this year's FIARP, May 21 through

25, Army North leaders escorted senior Mexican Army leaders to Washington, D.C., to meet with senior Department of Defense and Department of Homeland Security leaders.

The command also participates in the Military Personnel Exchange Program, this year assessing the program and "re-greening" the 21 American Army officers and noncommissioned officers serving in posts in the Canadian Armed Forces.

From May 14 to 18, Army North ensured the Army personnel underwent required annual training, medical and dental care, took an Army physical fitness test, obtained their Department of the Army photos, replacement uniforms and equipment, and many

other garrison support functions.

Army North conducted Vibrant Response 13, a major incident exercise from July 26 to Aug. 13 with the FBI, FEMA and more than 9,000 service members and civilians at the unique disaster training area at Muscatatuck Urban Training Center, Ind., in addition to Camp Atterbury and 10 other training areas and airfields in southern Indiana and northern Kentucky.

Throughout the year Army North certified and trained elements of the nation's new 5,200-man Defense Chemical, Biological, Radiological and Nuclear Response Force, which took over the mission Oct. 1, and the smaller Command and Control Response Elements A and B.



Photo by Staff Sgt. Keith Anderson

Sgt. 1st Class Wendell Reed radios in on a microphone inside his protective equipment, after he and his partner, Staff Sgt. Michael King, detect radiation while clearing a route, as part of Vibrant Response 13, a catastrophic incident exercise conducted by U.S. Northern Command and led by U.S. Army North at Muscatatuck Urban Training Center, Ind. Reed, the chemical, biological, radiological and nuclear noncommissioned officer, and King, the survey team chief, 45th Weapons of Mass Destruction Civil Support Team, Tennessee Army National Guard, were clearing a route to an area hospital for the scenario.



Photo by Seaman Nicholas S. Tenorio

Pfc. Sasha Walker, assigned to 42nd Infantry Division, New York Army National Guard, gives 2-year old Jaseem Kaheem Eliss, a resident of Far Rockaway in Queens, food aid as the community recovers from Hurricane Sandy. Hurricane Sandy was the largest Atlantic hurricane on record and caused the most damage in New York and New Jersey Oct. 29.

Personnel from Army North assisted with the Republican and Democratic National Conventions and locally supported many Army and community events, including Fiesta San Antonio, Celebrate America's Military Week, Armed Forces Day, the U.S. Army All-American National Conventions and the Vietnam Veteran's Welcome Home Ceremony at Joint Base San Antonio-Fort Sam Houston.

AMEDD improving Army medicine on the battlefield

By Phil Reidinger
AMEDDC&S Public Affairs

Several changes made the news in 2012 as the U.S. Army Medical Command looks into improving Army medicine on the battlefield.

The command's mission focuses on envisioning, designing and training the Army's premier medical force.

The Army is adding more than 1,000 behavioral health Soldiers and assigning them to every

brigade in the active Army, National Guard and Army Reserve.

The intent is to increase access for Soldiers who need help and to have a greater capability in supporting the brigades.

Each brigade combat team now has an additional behavioral health officer who is a clinical social worker or licensed psychologist and an additional enlisted behavioral health specialist.

The change doubles



File photo

The U.S. Army Medical Command's mission focuses on envisioning, designing and training the Army's premier medical force.

the number of officer and enlisted personnel

and one of the enlisted team members will be an NCO.

The four-person teams also will be assigned to every Army brigade, not just the brigade combat teams.

Combat support hospitals also will get a new look.

The redesigned hospitalization capability will be more modular and

flexible, have greater trauma care and surgical capacity and will be able to operate in multiple locations.

Specialized elements of the new hospital give the medical planner a range of units including a 32-bed field hospital, three different augmentation detachments that can be added to the field hospital to increase its

surgical, medical or ward capabilities.

This flexibility will permit the Army Medical Department to achieve the same high level of clinical outcomes for our patients while reducing the medical footprint and logistical support requirements.

In 2012, the AMEDD announced that seven medical fields would get their own Military Occupational Specialty.

The new MOSs are a result of restructuring the 68W healthcare specialist MOS by splitting off specialties that used 68W additional skill identifiers. The change

See AMEDDC&S, P9

2012 a very active year for USAMITC

By Kenneth Blair Hogue
USAMITC Public Affairs

The U.S. Army Medical Information Technology Center had a very active year in 2012.

As an information management/information technology command, USAMITC was on the cutting edge of many computer-related issues in Army Medicine.

USAMITC lead the efforts to transition and upgrade all U.S. Army Medical Command computers from Windows XP to Windows® 7. This massive migration included end-user devices at every MEDCOM site throughout the world. The transition to Windows® 7 for all MEDCOM computers



Col. Andrew J. Smith, USAMITC's incoming commander, addresses the audience at a change of command ceremony held at the Blesse Auditorium June 22.

concluded in 2012.

USAMITC's Video Network Center was up-

graded to meet growing requirements. The VNC supports and provides the infrastructure for video teleconferencing throughout the MEDCOM enterprise network worldwide. The center is a leader in the video conferencing field, and for its size, was the first to reach this technological benchmark.

This includes video teleconferencing among U.S. Army Office of the Surgeon General staff members, between military treatment facilities (staff members and other health care professionals) and patients, medical consults between patients and providers, etc.

USAMITC held a change of command

ceremony June 22 at the Blesse Auditorium, with Lt. Col. Beverly A. Beavers relinquishing command to Col. Andrew J. Smith.

Smith arrived here after being the G6/Chief Information Officer at the Western Regional Medical Command, Joint Base Lewis-McChord, Wash. Beavers took his place at the same command.

This event was hosted by the MEDCOM, and featured remarks by the MEDCOM Chief of Staff Herbert A. Coley, followed by the remarks of the outgoing and incoming commanders.

Finally, USAMITC hosted the Enterprise Management Technical Working Group at an



Photos by Kenneth Blair Hogue

Lt. Col. Beverly A. Beavers, USAMITC's outgoing commander, receives the Legion of Merit from Army Medical Command Chief of Staff Herbert Coley at USAMITC's change of command ceremony June 22.

assembly hall type venue on Joint Base San Antonio-Fort Sam Houston.

This three-day conference included personnel

assigned to Army medical treatment facilities, regional medical com-

See USAMITC, P9

METC takes a look back on eventful 2012

By Lisa Braun
METC Public Affairs

It was on June 30, 2010 that the Medical Education and Training Campus came alive with a ribbon-cutting ceremony and celebration to mark its initial operating capability and of what has become the largest consolidation of military training in the Department of Defense history.

Now, the sprawling state-of-the-art, enlisted medical training center has been open for business more than two years.

Fully operational since September 15, 2011 – the deadline given by the 2005 Base Realignment and Closure Commission to co-locate all enlisted medical training to Joint Base San Antonio-Fort Sam Houston – METC carries an average daily student load of about 6,000, and graduates roughly 20,000 annually.

The year 2012 saw METC move even further forward as the largest facilitator of enlisted medical career fields in the world for Army, Navy, Air Force and Coast Guard medics, corpsmen and medical technicians.

METC proudly looks back at several highlights and accomplishments during the year. As of Dec. 19, METC had graduated 19,608 students from the more than 50 medical training programs of instruction to continue the mission of supporting our nation's ability to engage globally.

In the month of May, Chief Master Sgt. Joel Berry assumed the position as the second command chief whose role is to act as principle advisor



Photo by Airman 1st Class Xavier Lockley

First-place winners of the 2012 Emergency Medical Technician Rodeo was a team from the Medical Education and Training Campus at Joint Base San Antonio-Fort Sam Houston. From left are Tech. Sgt. Dahlia Gonzalez, Hospital Corpsman Second Class Jeffrey Leemauk, Staff Sgt. Robert Rangel, Staff Sgt. Brett Wolfe and Hospital Corpsman First Class Luis Rodriguez.

to the commandant. He relieved Chief Master Sgt. Kevin Lambing, METC's first command chief, who served in the role since January 2010.

Also in May the prestigious Mercury Award was presented to the METC Information Management Division team.

This award recognized Army Medical Department personnel who have made significant contributions and demonstrated outstanding excellence and achievement in Information Management/Information Technology and recognized the critical nature of information and its supporting technologies in mission accomplishment. The name, Mercury, recalls the Roman god known for rapid transport of critical messages and information.

The inaugural METC commandant, Navy Rear

Adm. Bob Kiser, concluded an exemplary 38-year navy career with a retirement ceremony June 15.

Kiser became a part of METC history when he arrived as the first commandant in May 2010. Under his leadership, the campus went from initial operating capability to full operating capability within 15 months, shaping the way ahead for enlisted military medical education and training operations of the future.

In the meantime, the deputy commandant, Army Col. Gino Montagnano, assumed the role of interim commandant until the arrival of the new commandant to METC.

Navy Rear Adm. William Roberts became the second METC commandant during an assumption ceremony Sept. 7.

Five Air Force and Navy Emergency Medi-

cal Technician instructors for METC's Basic Medical Technician Corpsman Program took first place overall in the 2012 Air Force Emergency Medical Technician Rodeo held at Cannon Air Force Base, N.M. Sept. 22.

The bi-service team competed against eight other teams from U.S. military installations all over the United States and Germany in the sixth consecutive year for the competition.

A team from the Council on Occupational Education conducted a visit in October to determine whether METC had met the 29 conditions and 107 criteria required to become accredited.

The visit resulted in METC receiving commendations in two areas. The first commendation was for excellence in the area of Human Resources-Faculty Development; the



Photo by Lisa Braun

Navy Rear Adm. William M. Roberts became the second commandant of the Medical Education and Training Campus during an Assumption of Command ceremony Sept. 7. Roberts (right) relieves Army Col. Gino Montagnano, METC deputy commandant, who served as interim commandant during the prior three months.

second area was that of maintaining student records, particularly with the progression in working with three service-specific systems, a task that is extremely difficult with just one system.

The final decision and results of the visit will be decided at the COE Commission meeting in February 2013.

In November, Staff Sgt. Yvonne Solorio, a METC IMD client support technician, was selected as the Air Force Outstanding Client Systems Noncommissioned Officer of the Year for the 37th Training Wing.

Solorio, who is deployed to Guantanamo Bay, Cuba, was chosen as part of the AF Information Dominance Awards program that recognizes individuals, teams and units for sus-

Change defines 2012 for Mission and Installation Contracting Command

By Daniel P. Elkins
MICC Public Affairs

A year of change best describes 2012 for members of the Mission and Installation Contracting Command.

From new leadership and command transformation to taking occupancy of one of Joint Base San Antonio-Fort Sam Houston's most historic buildings, members of the MICC found changes in the physical and organizational landscape to be a constant.

A ribbon-cutting ceremony in March marked the official move of the MICC into the historic Long Barracks, which dates back to 1885.

After sitting vacant for a number of years, the 2005 Base Realignment and Closure Commission decision to move approximately 14,000 additional people to JBASA-Fort Sam

Houston breathed new life into renovation efforts of the historic barracks that spans 1,084 feet long.

Renovations to the Long Barracks, which cost approximately \$25 million, now affords members of the MICC more than 72,000 square feet of modern office space and storage.

Two new leaders joined the MICC in 2012 as a third was appointed to the Senior Executive Service.

Command Sgt. Maj. Rodney Rhoades came on board in January following the retirement of the command's previous enlisted leader.

The MICC's deputy to the commander, George Cabaniss Jr., was appointed to the Senior Executive Service in March after arriving at the command three months earlier and is one of ap-

proximately 300 members to serve in key SES positions responsible as a link between presidential appointees and the federal workforce.

Brig. Gen. Kirk Vollmecke assumed command of the MICC during a March ceremony in front of the Long Barracks.

With the start of the new fiscal year, officials at the MICC became responsible for overseeing the contract administration of most directorate of logistics services in the United States.

Administrative control for DOL contract requirements transferred from the Army's Installation Management Command to the Sustainment Command as part of the service's Enhanced Army Global Logistics Enterprise, or EAGLE, program to centralize manage-

ment and standardize installation maintenance, supply and transportation services across the Army materiel enterprise while reducing costs. MICC contracting officials perform post-award contracting functions at the local installation level.

Just as it started 2012, the command finished the year in transformation.

Officials realigned six field directorate offices into four Dec. 4 in a strategic effort to bring consistency to its operations and improve contract administration and oversight.

Of the two other field directorates, MICC-Fort Sam Houston is serving as the headquarters' activity responsible for acquisitions not provided by other MICC elements.

The remaining 34

See MICC, P9



Photo by Mike O'Rear

Brig. Gen. Kirk Vollmecke addresses the more than 200 military and civilian guests in attendance at the MICC change of command ceremony March 28 at Joint Base San Antonio-Fort Sam Houston.

Wong: 'It's been another amazing year for BAMC'



Courtesy photo
Brooke Army Medical Center has the Department of Defense's only stateside Level I trauma center, the only DOD Burn Center and the only building in the DOD with a rooftop helipad.

The holiday season is a perfect time to gather with family and friends and to reflect on our blessings and accomplishments of the past year.

It's been another amazing year for Brooke Army Medical Center, with a number of milestones reached and accolades received.

Over the past year, we had a daily average of more than 3,500 clinic visits, 174 emergency room visits and 52 surgeries.

We issued more than 4,500 outpatient prescriptions, performed nearly 10,000 laboratory tests, and completed 950 radiology procedures on a daily basis.

We are the Department of Defense's only stateside Level I trauma center, only burn center in the DoD, and the only building in DOD with a rooftop helipad.

If that's not impressive enough, we also passed our Joint Commission survey with remarkable success and minimal findings.

It was my first survey, and I joked at the time that the process was much easier than anticipated.

But we all know it's not easy, it's tremendously challenging. I'm fortunate to have an incredibly dedicated and talented staff that can make even the most difficult challenges appear effortless.

The Joint Commission was just one of many surveys we accomplished with excellence in 2012.

Among others, BAMC's trauma and cancer programs received top praise in their inspections. Our network was validated again during a Defense Information Assurance Certification and Accreditation Process where we were recognized as a "Top Wired Hospital in the U.S."

These outstanding accomplishments speak volumes of our staff and our departments, particularly in light of the tremendous challenges we've overcome in recent years.

The most notable challenge was more than 400 moves of staff and space associated with the Base Realignment and Closure 2005 initia-

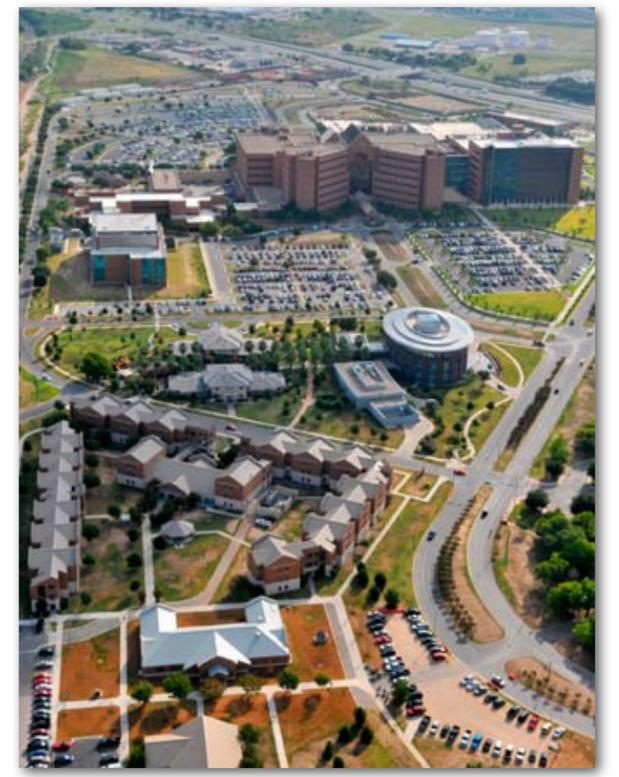


"occupation" of the Consolidated Tower in June 2012.

We've also managed to successfully integrate personnel from two services, sharing our best practices and working through sometimes amusing terminology differences.

For instance, what the Army calls a battle buddy, the Air Force refers to as a wingman. If I could adapt a famous quote and say, "We are two health systems separated by a common language."

But no matter the differences in terminology or procedures, we have overcome each challenge we have faced with determination and a com-



Courtesy photo
More than 400 moves of staff and space were associated with BRAC since 2007. Seventy-eight of these were accomplished within the past year.

mon goal in mind: providing the best-quality, safe, compassionate, patient-centered care.

I could not be more proud of how far we've come together and am excited to see the future unfold.

We will continue to work hand-in-hand with the San Antonio Military Health System and leaders of the 59th Medical Wing to consolidate services, enhance care and improve efficiencies between BAMC and the 59th MDW.

In light of the past, we can surely look forward to a great New Year.

From my family to yours: Have a safe and happy holiday season! See you in 2013!

Serving to heal. Honored to serve.

Maj. Gen. M. Ted Wong
Commanding General,
San Antonio Military Medical Center
and Southern Regional Medical Command

AMEDDC&S from P4

focuses the 68W MOSC training on specialized trauma care. The new specialties include practical nurse, occupational therapy, physical therapy, orthopedic specialist, nose, throat, and eye specialist and cardiovascular specialist.

The Soldiers assigned to the new specialties will no longer be required to attend the 16 weeks of basic combat medic training. Instead, they will attend a four-week introduction to medicine program and then attend specialty training.

The Army Medical Department also is adding more, and tougher, training for flight medics.

Soldiers who want to be flight medics will now have to complete a nine-month, three-phase training program.

The training starts with four weeks of flight medic training followed by six months of paramedic emergency medical technician training and eight weeks of critical care flight medical training. The initial flight medic training occurs at Fort Rucker, Ala.

The AMEDD Center and School contracted with University of Texas Health Sciences Center to send students to their paramedic technician training and the critical care course is conducted at BAMC.

The AMEDD Center and School will offer the flight paramedic course three times each year for 30 students per class.

The Army Medical Department Board was busy testing and evaluating systems that can support future battlefields.

The U.S. Army Medical Department Board conducted a customer assessment of The Force Provider Expeditionary-Medical Systems 84-Bed Hospital Company Chemically Protected Deployable Medical Systems with the 14th Combat Support Hospital April 10 through 24.

The purpose of this customer assessment was to provide a means for the U.S. Army Medical Department Board to assess the functionality of the Force Provider Expeditionary-Medical Systems in supporting the medical mission.

This evaluation used an 84-bed hospital company and a limited chemically protected DEPMEDES to consider a 44-bed early entry hospitalization element and a 40-bed hospitalization augmentation element. A power assessment of the 84-bed hospital company also was conducted. Soldiers from the 14th Combat Support Hospital, Fort Benning, Ga., supported an assessment of the new air beam hospital shelter to evaluate the functionality of the system in supporting the medical mission as a potential replacement for the current TEMPER and Alaskan shelters.

The U.S. Army Medical Department Board test officers evaluated the Burn Resuscitation Decision Support System in a simulated operational environment.

The evaluation took place at the Deployable Medical Systems Equipment and Training site at Joint Base San Antonio-Camp Bullis May

15 and 16. The board test officers evaluated a burn resuscitation decision support system which is a commercial-off-the-shelf tablet-type device with a dedicated software application that implements acute burn fluid resuscitation.

The report will assist USAMMA in determining whether or not the BRDSS device meets the requirements to support Roles II and III and en-route medical care of seriously burned patients.

Another customer assessment conducted by the U.S. Army Medical Department Board test officers evaluated the Environmental Sentinel Biomonitor in an operational environment using typical operators and maintainers.

Soldiers also tested the prototype Environmental Sentinel Biomonitor system as an acceptable replacement for the currently fielded analyzer. The ESB system will be used to evaluate the toxicity and microbiological quality of water intended for potable use.

The safety of blood products is a critical component of combat casualty care.

The U.S. Army Medical Department Board test officers conducted an assessment of the Pathogen Reduction Device determining if the equipment is an acceptable device to treat whole blood for transfusion in an operational environment.

The PRD is designed to be used to treat whole blood for viruses, bacteria, and protozoans prior to transfusion and to deactivate white blood cells.

These face-to-face meetings help to facilitate better communication and honest discussion.

These conferences are held to assist keeping field personnel up

with the ever-changing information technology landscape and to exchange ideas regarding enterprise IT direction.

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Photo by Ed Dixon
(From left) Mission and Installation Contracting Command Command Sgt. Maj. Rodney Rhoades, Danny Durobles, U.S. Army Corps of Engineers; Joan Gaither, Society for the Preservation of Historic Fort Sam Houston; retired Master Sgt. Givens Forsythe; Brig. Gen. Stephen Leisenring, former MICC commanding general; Dr. Carol Lowman, Army Contracting Command director; Brig. Gen. Theresa Carter, 502nd Air Base Wing commander; George Cabaniss, MICC deputy to the commanding general; and Command Sgt. Maj. John Murray, ACC, cut the ribbon officially opening the doors of the Long Barracks during a ceremony March 27 at JBSA-Fort Sam Houston.

MICC from P7

subordinate contracting offices located throughout the country and Puerto Rico will be realigned under the four directorates.

The MICC is responsible for providing contracting support for the warfighter across Army

commands, installations and activities located throughout the continental United States and Puerto Rico.

In fiscal 2012, the command executed more than 58,000 contract actions worth more than \$6.3 billion across the

Army, including more than \$2.6 billion to small businesses.

The command also managed more than 1.2 million Government Purchase Card Program transactions valued at an additional \$1.3 billion.



Photo by Kenneth Blair Hogue
A shot of USAMITC's recently upgraded and expanded video bridge within the Video Network Center. The VNC is a branch within USAMITC's Customer Service Division.

USAMITC from P5

These face-to-face meetings help to facilitate better communication and honest discussion.

Military medicine in San Antonio 2012

By Col. Mary Garr
Chief Operating Officer, San Antonio Military Health System

Military medicine in San Antonio is a strategic asset and center of gravity within the Department of Defense due to Base Realignment and Closure 2005 and other transformations. Military medicine in San Antonio operates under four major platforms: healthcare delivery, health education and training, clinical research and development, and military readiness, while providing a direct annual economic impact to San Antonio of \$3 billion.



Medical headquarters in San Antonio

San Antonio is home to the headquarters of the U.S. Army Medical Command, commanded by the Army Surgeon General, which provides health policy and oversight to all Army medical facilities worldwide.

The Army also has multiple medical subordinate regional and local commands in San Antonio.

The Air Force Medical Operations Agency oversees execution of the Air Force Surgeon General's policies supporting Air Force expeditionary capabilities, healthcare operations and national security strategy.

The Navy moved its Navy Medical Education and Training Command to San Antonio in 2012 to oversee all its Navy medical education and training programs worldwide.

The Defense Medical Readiness Training Institute is a DoD tri-service command providing joint medical readiness training in trauma, burn care, disaster preparedness, humanitarian assistance and CBRNE preparation/response. Medical information technology platforms are now all headquartered in San Antonio.



Clinical research and development

Military medicine continues to excel in its clinical research and development efforts, through partnering within DOD, and with the Veterans Administration, other federal entities, academia and civilian industry, driving advances in care for our servicemen and women and their families, as well as the civilian community.

The San Antonio Military Health System has approximately 1,200 active protocols conducting clinical research in many different areas, such as trauma/critical care and en route care, diagnostic devices and therapeutic strategies, medical modeling and simulation training, and clinical and rehabilita-



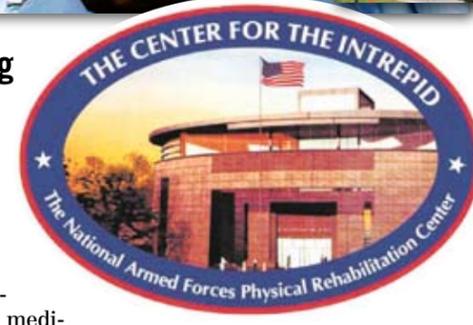
tive medicine. In partnership with the different service organizations at the Battlefield Health and Trauma Research Institute, co-located with the San Antonio Military Medical Center, remarkable advances have been made in many different areas. These include pain management, regenerative medicine, traumatic brain injury treatment, vascular injury management, wound and burn care that have saved lives on the battlefield as well as improved quality of life for our wounded warriors during and following rehabilitation. These advances have also been applied in civilian settings.

The Naval Medical Research Unit in San Antonio conducts medical, dental, and directed energy biomedical research focusing on ways to enhance the health, safety, performance and operational readiness of Navy and Marine Corps personnel and address their emergent medical and dental problems in routine and combat operations. Specific ongoing research includes nanoparticles, infection, directed energy, fatigue and sleep deprivation and mercury abatement filters for dental operations.

Military readiness is infused throughout every aspect of military medicine in San Antonio. Military medical units interact routinely with San Antonio organizations engaged in health and bioscience. Collaborations have continued to grow and evolve, providing opportunities to improve in healthcare delivery, health education and training, and clinical research and development, which all support our nation's military readiness requirements.

BAMC and the University Health System were only two of 154 hospitals recognized as the most wired hospitals in the nation, according to the results of the 2012 Most Wired Survey. San Antonio is only one of three sites around the world selected to be test sites for an integrated electronic health record between the DOD and VA.

Military activities make up more than 13 percent of the San Antonio healthcare and bioscience industry.



Health education and training

San Antonio has been the "Home of Army Medicine" since 1947 and is now the "Home of Military Medicine" with the new Medical Education and Training Campus, which consolidated DOD's enlisted medical training on Joint Base San Antonio-Fort Sam Houston and JBSA-Camp Bullis, providing more than 60 medical programs.

The Army Medical Department Center and School hosts more than 200 courses, to include six masters degree programs and seven doctoral degree programs. These two organizations train more healthcare professionals than any organization in the world, with more than 60,000 students trained annually.

SAMHS has 35 graduate medical education programs with more than 600 residents, along with numerous clinical, nursing and allied science programs training healthcare professionals who are then stationed around the world.

Military healthcare

Military healthcare delivery is provided by Brooke Army Medical Center and the 59th Medical Wing through their various medical facilities spread throughout Joint Base San Antonio and the city of San Antonio.

Together, the two commands comprise the San Antonio Military Health System and support more than 240,000 beneficiaries.

BAMC consolidated all military inpatient capabilities and the hospital was renamed the San Antonio Military Medical Center. It is now the Department of Defense's largest inpatient medical facility.

The Wilford Hall Medical Center transitioned into the Wilford Hall Ambulatory Surgical Center and is now DOD's largest outpatient



medical facility. As the DOD's only Level I trauma center in the United States, SAMMC continues to participate in the San Antonio Trauma Regional Advisory Council providing trauma care to the South Texas region. With the Institute for Surgical Re-

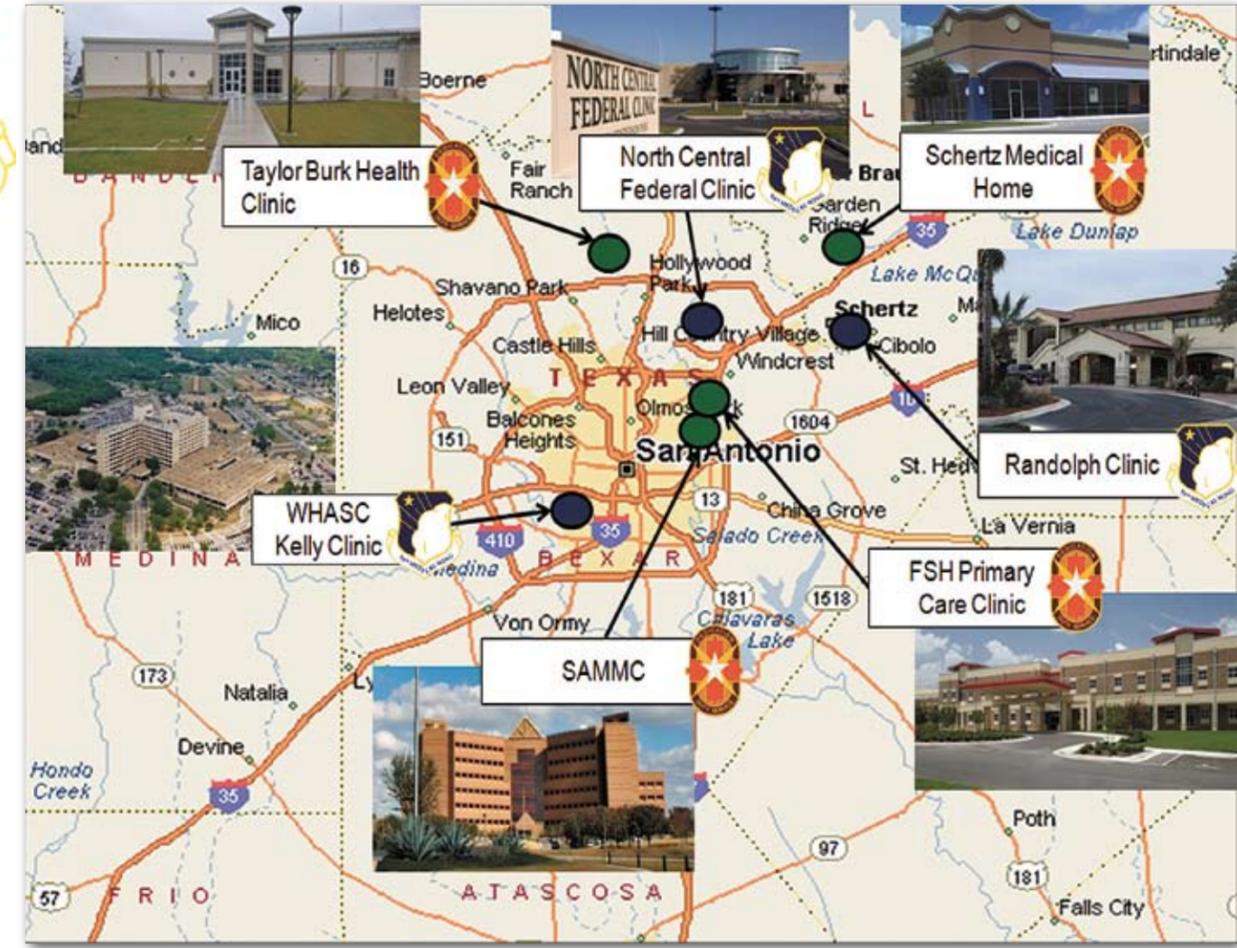
search at BAMC, which is DOD's only burn center, patients from around the world receive state-of-the-art care and research from their efforts are supporting improvements in burn and wound care.

BAMC also hosts DOD's only bone marrow transplant unit.

The Center for the Intrepid rehabilitates wounded warriors with amputations, burns or functional limb loss and promotes research in orthopaedics, prosthetics and physical/occupational rehabilitation.

The 59th Medical Wing is the new home of the Air Force's largest Aeromedical Staging Facility and the DOD's Critical Care Air Transport Pilot Unit.

The 59th Medical Wing also hosts DOD's largest blood donor center, its largest dental facility and has DOD's only extracorporeal membrane oxygenation system capability.



ARSOUTH saw new leaders in top positions, conducted robust exercises, engagements in 2012

By Lt. Col. Antwan C. Williams
U.S. Army South Public Affairs

2012 was a very busy period for U.S. Army South with personnel changes in senior command positions, while the command was simultaneously conducting, hosting or participating in several multinational exercises in the United States and in our area of responsibility of Central and South America and the Caribbean.

Army South's top five key leaders changed in 2012 with the arrival of Col. Bill V. Hill III as the chief of staff, Kate Bentley as command foreign policy advisor, Sgt. Maj. Dennis C. Zavodsky as command sergeant major, Brig. Gen. Orlando Salinas as deputy commanding general and in September, Maj. Gen. Frederick S. Rudesheim as ARSOUTH commanding general.

Army South began 2012 planning and then successfully executing the Beyond the Horizon exercise in the countries of Honduras and Guatemala.

BTH is an Army South and U.S. Southern Command exercise deploying military engineers and medical professionals for training, while providing services to rural communities with medical, dental and engineering/facility construction.

During the three-month BTH operation, several medical readiness and training exercises took place with more than 43,500 people receiving medical and dental treatment and 17,000



Brig. Gen. Alejandro Arancibia (center), the Chilean army international affairs director, guides Maj. Gen. Frederick S. Rudesheim (right) the U.S. Army South commanding general, during a tour of the Museo Historico y Militar de Chile (Chilean Military History Museum) during the second day of the army-to-army staff talks between the U.S. and Chile Nov. 6 in Santiago, Chile.

animals being vaccinated.

The U.S. military personnel made up of 2,200 Army, Navy and Air Force Reserve, National Guard and active-duty troops, also constructed or renovated six schools and five medical clinics in Honduras and Guatemala.

BTH was not the only partner nation involvement for Army South in 2012.

The command also hosted or traveled to con-

duct bilateral annual staff talks with armies from Brazil, Chile, El Salvador and Colombia. The staff talks are conducted annually on behalf of the Chief of Staff of the Army and have been instrumental in enhancing the interoperability and cooperation between the partner nations' armies, which contributes to increased security and stability in the region.

Army South hosted the annual Fuerzas Aliadas



Photos by Eric R. Lucero

Sgt. Matthew Archilla (center), a medic assigned to the 228th Combat Support Hospital, works with members of the Belize Defense Force to steady rappel lines attached to a basket with a simulated casualty during a high angle casualty evacuation near Belmopan, Belize, Feb. 11.

PANAMAX exercise at Joint Base San Antonio-Fort Sam Houston with armed and security forces from 17 nations.

The exercise brings together sea, air and land forces in a joint and combined operation focused on defending the Panama Canal from attacks by a fictitious violent extremist organization as well as responding to natural disasters and pandemic outbreaks in various locations. The exercise took place simultaneously at JBSA-Fort Sam Houston, Miami, Suffolk, Va., and in Panama Aug. 6 through 17.

Army South personnel also participated in Peacekeeping Operations

Americas exercise which took place in phases in Chile and the Dominican Republic. PKO-A is an annual exercise that trains personnel for U.N. peacekeeping initiatives in Central and South America and the Caribbean.

The command also sponsored a Conference of American Armies' legal conference with military attorneys from 15 partner nations in San Antonio. In addition, Army South hosted dozens of visitors and senior military leaders from its partner nations.

Army South is a flexible, agile and responsive Army Service Component Command capable of simultaneously conducting

theater security cooperation and contingency operations for SOUTHCOM and the Department of the Army.

In the New Year, the command will continue to successfully execute its mission of conducting and supporting multinational operations and security cooperation in the SOUTHCOM area of responsibility in order to counter transnational threats and strengthen regional security in defense of the homeland.

"Army South personnel must continue to be prepared to deploy at a moment's notice to support our combatant commander," Rudesheim said.

470th Military Intelligence Brigade looks back on 2012

By Gregory Ripps
470th MIB Public Affairs

The 470th Military Intelligence Brigade opened 2012 with one of its battalions already deployed to Afghanistan in support of Operation Enduring Freedom and another battalion preparing for a similar mission. The 201st MI Battalion began the year with its approximately 150 Soldiers training in individual intelligence collection tasks. They then progressed through team- and company-level tasks to culminate their training with battalion-level intel-

ligence collection tasks. Lt. Col. Joe Barber, 201st MI Battalion commander, explained that the end result was that the Soldiers could provide actionable, or useful, intelligence to the warfighter "on the ground" and to "make that intelligence the best they can produce." Most training took place at the Intelligence and Security Command Detention Training Facility operated by the 470th MI Brigade on Joint Base San Antonio-Camp Bullis. The IDTF simulates facilities used overseas for questioning detainees

and analyzing information. Throughout the year, the IDTF provided training for other MI battalions and battlefield surveillance battalions. "The scenarios are designed to train Soldiers in their individual skill sets, in tactics, techniques and procedures, and with their equipment to prepare them for deployments 'down range,'" said Lt. Col. Kevin Hosier, brigade operations and training officer. Among those other units training at the IDTF was the 338th MI Battalion, an Army re-

serve component of the 470th MIB. Nearly 100 of the 338th's Soldiers performed annual training at JBSA-Camp Bullis not only to enhance their warrior and specialty skills but also to get to know one another. Although headquartered on JBSA-Camp Bullis, the 338th includes members from Kansas, New York and other states. The 201st Military Intelligence Battalion cased its colors Sept. 6, and a few days later, its members deployed to

See 470TH MIB, P16



Photo by Gregory Ripps

Lt. Col. Kris Arnold, 14th Military Intelligence Battalion commander, and battalion Command Sgt. Maj. Michael Fanelli uncased the battalion's colors during a ceremony at the 470th MI Brigade's vehicle maintenance area Dec. 3. The uncasing symbolizes the 470th MI Brigade subordinate battalion's official return to duty at Joint Base San Antonio-Fort Sam Houston following its redeployment from Afghanistan.

U.S. Army Installation Management Command reviews 2012 successes

By Amanda Rodriguez
IMCOM Public Affairs

2012 marks the 10th anniversary of the U.S. Army Installation Management Command. Since its founding in 2002 as the Installation Management Agency, it has undergone many changes and transitions, including relocating from Washington, D.C., area to Joint Base San Antonio-Fort Sam Houston. It also marks IMCOM's first full year in its permanent headquarters at JBSA-FSH and under its commanding general, Lt. Gen. Mike Ferriter.

IMCOM handles the day-to-day operations of U.S. Army installations around the globe. Army installations are communities that provide many of the same types of services expected from any small city. IMCOM's garrisons are made up of the people who provide fire, police, housing, recreation and child care and other activities in Army communities every day. Upon his arrival in November 2011, Ferriter charged each individual at IMCOM to demonstrate inspired leadership and provide world-class cus-

tomers service. Those customers are anyone who uses garrison services, such as active and reserve component Soldiers, families, civilians, retirees, veterans, wounded warriors and survivors. The headquarters in San Antonio strives to empower each installation's senior commander and garrison commander to deliver the programs with the greatest positive effects on customers. This year, IMCOM put its focus on Soldiers, families and veterans in transition. The command emphasized major initiatives like the Army Career and Alumni Program and implementation of the Veterans Opportunity to Work act. Garrison ACAP offices took an active role in promoting job fairs for Soldiers, Families and veterans.

IMCOM's partnerships with organizations like Hero 2 Hired brought an unprecedented number of job and career fair events to garrisons around the globe. Only prospective employers with immediate openings could take part - good news for transitioning Soldiers. 2012 also saw IMCOM taking steps to enhance Soldier and Family resilience through the delivery of other critical programs. These included the Total Army Sponsorship Program, Sexual Harassment and Assault Response and Prevention, Alcohol and Substance Abuse Program, Exceptional Family Member Program, Soldier and

Family Assistance Centers (serving wounded warriors and their families), continuing education, suicide prevention and Comprehensive Soldier and Family Fitness. September was particularly dedicated to survivors and Gold Star Mothers (mothers of fallen service members). Campaign events culminated Sept. 29 with a ribbon-cutting ceremony to open the Survivor Outreach Services Center in San Antonio, as well as a 2012 U.S. Army Soldier Show live perfor-

mance dedicated to Gold Star Mothers, a reception and tour of the new SOS center. The Soldier Show opened during Fiesta Week 2012 at its new home in the Fort Sam Houston Theatre, restored after many years of standing empty to be the home of Army Entertainment, one of IMCOM's Family and Morale, Welfare and Recreation programs. As 2012 draws to a close, the installation support community looks back on these and other



Photo by Amanda Rodriguez

Lt. Gen. Mike Ferriter, commanding general of U.S. Army Installation Management Command, and his wife Margie visit with Gold Star Mothers and Family members Sept. 29 at a ribbon cutting ceremony opening the Survivor Outreach Services Center here. Mothers of fallen service members were coined "Gold Star Mothers" beginning in WW I, for the gold stars they displayed in their windows. Their unified strength and sacrifice led to national recognition and Sept. 30 is now observed as Gold Star Mother's Day in their honor.



Photo by Tim Hipps

Georgia Army National Guard Spc. Constance Mack, representing the Presidio of Monterey, Calif., sings en route to winning the 2012 Operation Rising Star contest Dec. 11 at Fort Sam Houston Theatre, home of Army Entertainment.

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highlights as varied as support to Army Olympians through the World-Class Athlete Program, the second IMCOM Best Warrior competition, Net-Zero sustainability programs, the Joint Services Teen Council, the Garrison Commanders Conference and Operation Rising Star as successes not because they occurred, but because they served the needs of Soldiers and families today and tomorrow. (Neal Snyder, IMCOM public affairs, contributed to this article.)

Medical revolutions highlighted in USAISR's 10-year supplement

By Steven Galvan
U.S. Army Institute of Surgical
Research Public Affairs

The U.S. Army Institute of Surgical Research announces the release of a capstone publication in the *Journal of Trauma and Acute Care Surgery* summarizing key medical advances from the war-time experience of the U.S. military.

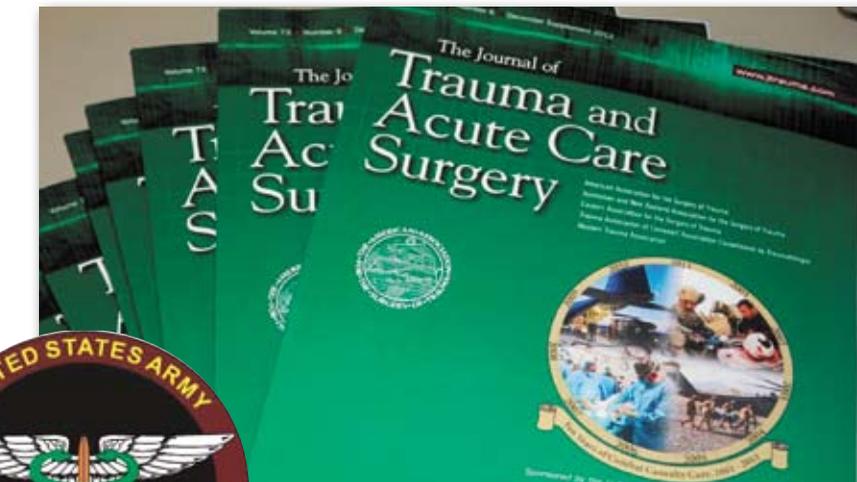
As a subordinate command of the U.S. Army Medical Research and Materiel Command at Fort Detrick, Md., the USAISR strives to be the nation's premier joint research organization planning and executing registry-based and translational research providing innovative solutions for burn, trauma and combat casualty care from the point of injury through rehabilitation.

The publication describes a triad of military medical revolutions in three key areas of military trauma medicine: pre-hospital care, deployed hospital care and trauma systems and

restorative medicine. Together these articles provide an important milestone in military medical care and highlight how the lessons learned in war have translated to improving trauma care delivered in U.S. civilian trauma centers.

"The goals of this supplement are twofold, to document the landmark medical advances from this war and to document the gaps along the continuum of combat casualty care from a historical perspective so in the future medical personnel can bridge these gaps and save lives," said senior editor of the supplement and former USAISR Commander, Col. (Dr.) Lorne H. Blackbourne.

"Documenting the revolutionary advances from these wars can help with the translation of military advances to civilian trauma care so all Americans can benefit in addition to our wounded



The U.S. Army Institute of Surgical Research has released a capstone publication in the *Journal of Trauma and Acute Care Surgery* summarizing key medical advances from the war-time experience of the U.S. military. The publication describes a triad of military medical revolutions in three key areas of military trauma medicine; pre-hospital care, deployed hospital care, and trauma systems and restorative medicine.

warriors." "This supplement documents the extraordinary progress in saving lives on the battlefield that combat casualty care research has affected during the last decade," said David G. Baer, Ph.D., the Director of ISR Combat Casualty Care Research Directorate.

In order to ensure the widest distribution possible, the *Journal of Trauma* has made these three articles available on an open-access basis at <http://journals.lww.com/jtrauma/toc/2012/12005>.

These articles are supported by focused reviews of tactical combat

casualty care, analysis of the peer-reviewed combat trauma literature, burn care, coagulation monitoring, causes of death on the battlefield, amputations, blood product use, head and neck injuries, trauma training programs, innovations in treatment for pain and moderate to severe brain

injury. "The best way to optimize and direct research and trauma system efforts for the greatest good is evidence-based information on the burden of injury and capability gaps extrapolated from outcome data – the publications in this supplement provide the data to help guide all future efforts in these areas," said Blackbourne, the current director of the U.S. Army Trauma Training Center in Miami.

Together, these articles document extraordinary progress in saving lives on the battlefield, and highlight areas for continued innovation and translation of military medical expertise to saving the lives of civilian trauma victims.

"We're dedicated to optimizing combat casualty care," said USAISR Commander, Col. (Dr.) Michael A. Weber. "The research that we are conducting at this Institute is saving lives – on and off the battlefield."

470TH MIB from P14

Afghanistan in support of Operation Enduring Freedom. Then, on Oct. 21, the 14th MI Battalion came home from Afghanistan, uncasing its colors during a brief ceremony Dec. 3.

"Through constant challenge ... you kept your eye on the mission, you took care of your team, and you returned home setting a new standard for interrogation operations and our profession of arms in trust, discipline and fitness," said Col. Pierre Gervais, brigade commander.



Photo by Gregory Rippes

Sgt. Amanda Dodge (right) interviews a "detainee," role-played by Sgt. Jonathan Cagoya. The 201st Military Intelligence Battalion Soldiers were both involved in a field training exercise on Joint Base San Antonio-Camp Bullis Feb. 6 through 10.



Photo by Spc. Sammy Rosado

The inverted rope descent doesn't dismay Soldiers of the 401st Military Intelligence Company as they proceed through an obstacle course at Joint Base San Antonio-Camp Bullis. The company, a direct subordinate unit of 470th MI Brigade, conducted the training Nov. 29.